									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR								<b>'</b>	10/290,582				
CLAIMS AS FILED - PART ! (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN' OR SMALL ENTITY		
T	OTAL CLAIMS	<u> </u>	5					RATE FEE		] .	RATE	FEE	
FOR			mimber filed		NUMBER EXTRA			BASIC FEE 385.00		OR	Basic Fee	770.00	
TOTAL CHARGEABLE CLAIMS .			5 minus 20×		• 0			. XS 9* ~		OR	X518=		
BNI	DEPENDENT C	LAIMS	minus 3 •		Ø			X43		OR	X86=	·	
Ľ	ATIPLE DEPE	NDENT CLAIM P	RESĖNT					-145= -		OR	÷290*		
• If the difference in column 1 is less than zero, enter "O" in column 2								TOTAL	385	OR	TOTAL		
,	CLAIMS AS AMENDED - PART II (V) (Column 1) (Column 2) (Column 3)								LENTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	est Ser USLY	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE	
HENDMENT	Total		Minus	-5		•		X\$ 9=		OR	X\$18=		
AME	Independent	. /	Minus	-		•	l	X43=	:	OR	X86=		
Ľ	FIRST PRES	ENTATION OF M	ULTIPLE DE	LTIPLE DEPENDENT C		CLAIM		+145=		OR	•290 <del>•</del>		
								TOTA		1	TOTAL ADDIT, FEE		
	(Cotumn 1) PUF (Cotumn 2) (Cotumn 3)								E		AUXH. PEEI		
6		CLABAS REMAINING		HUME	ST	PRESENT	lr	···· • • • • • • • • • • • • • • • • •	ADDI-	1		ADDI-	
E	4-18-06	AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL		RATE	TIONAL	
AMENDMENT	Total	. 5	Minus	- 2	0	·Q:		x39=	/	OR	X\$18=		
AME	incopendent	MIATION OF M	Minus				l	X43=		OR	X86=		
Ц	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145		OR	+290s		
·								TOTAL DOTT. FEE		OR	YOYAL MODIT. PEE	·	
		(Column 1)		(Cotum		(Column 3)	· _	<u> </u>			- -		
FC	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMEKDMENT	Total		Minus	-		<b>.</b>		X\$ 9-	755	OR	X\$18-	- 155	
	independent	•	Minus	•••				X43=			X86=		
كا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							V-//		OR	A00=		
• p	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  "If the "Highest Humber Previously Paid For" BH THES SPACE is less than 20, enter "20."								· .	OR	+290=		
	the "Highest No	mber Previously Pa	in For' OH THE	S SPACE IS	hexa sher	13. enter "3."	_	TOTAL DOIT, FEE	لــنــا		won reel		
	rac rugnesi Num	ber Previously Paid	ror (fotal or	independen	n) is the	nighest rumbe	toun	e in ipe si	propries ba	in col	ann 1. -	I	
FORM	PTO-075 IRev 10	W.		<del></del>	_				mara,Office, U	5 NO.	DTMENT DE	COUNTRY BY	